

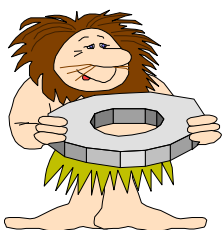
# NEWS AND VIEWS

## of Chemical Preparedness

### EPA Region VIII

Fall 2000 — Volume 1

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*Welcome to the new News & Views. I invite your input with news from your agencies that may be of interest to others. Address your news to C.G. Heister at the above address or fax to 303-312-6071 or e-mail [Heister.Charles@epa.gov](mailto:Heister.Charles@epa.gov).*

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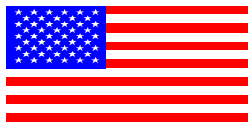
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### UPDATE ON FLAMMABLE FUELS

Any facility with more than 10,000 pounds of propane in a process that does NOT use the propane as a fuel, or is NOT a retail facility holding the propane for sale as a fuel, must be in compliance with the Clean Air Act Risk Management Program (RMP) regulations and must submit a Risk Management Plan.



On January 5, 2000, the U. S. Court of Appeals for the D.C. Circuit lifted its stay of the RMP regulations as they apply to propane. While the stay was in place, the Chemical Safety Information, Site Security and Fuels Regulatory Relief Act, was enacted. This law removed EPA's authority to subject flammable substances to the RMP regulations when the substance "is used as fuel or held for sale as a fuel at a retail facility" except under certain narrow circumstances.

EPA will issue a final rule to reflect the changes. The rule will revise the RMP list of regulated flammable substances to exclude those substances when used as a fuel or held for sale as a fuel at a retail facility.

EPA has identified approximately 2,000 facilities that have submitted Risk Management Plans that may be affected by the change in the RMP regulations. Other facilities also may be affected depending on whether they use other flammable substances as a fuel, but EPA will not be able to identify such facilities. The facilities EPA has identified will receive a notice from EPA advising them to consider whether they are affected by change in the law, and what to do if they are.

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## **LOCAL GOVERNMENT REIMBURSEMENT (LGR)**

### **Colorado**

The EPA Headquarters has evaluated applications submitted by Adams County, Arvada, and Wheatridge, Colorado for reimbursement for the cost incurred as a result of responses to clandestine methamphetamine laboratories in their jurisdictions. Based on the evaluations, the jurisdictions mentioned received \$8000 of Superfund monies.

### **Montana**

Lewis & Clark County, Montana has received an award of \$3,952.50 for costs incurred responding to a clandestine methamphetamine laboratory on March 28, 2000.

## **Large Scale Emergency Assistance**

The following is a list of programs that may be of assistance in case of large scale emergencies.



**The National Disaster Medical System (NDMS):** a cooperative asset- sharing program among Federal governments, and the private businesses and civilian volunteers to ensure resources are available to provide medical services following a disaster that overwhelms the local health care resources. Two principle assets are the DMAT and DMORT teams.

DMATs:

- Deploy to disaster sites with sufficient supplies and equipment to sustain themselves for a period of 72 hours
- Provide medical care at a fixed or temporary medical care site
- May provide primary health care and/or may serve to augment overloaded local health care staffs
- Principally a community resource available to support local, regional, and state requirements.
- As a National resource they can be federalized to provide interstate aid.

<http://home.rmi.net/~javaman/index.htm>

A **DMORT (DISASTER MORTUARY OPERATIONAL RESPONSE TEAM)** is a group of Funeral Directors, Medical Examiners, Coroners, Pathologists, Forensic Anthropologists, Medical Records Technicians and Transcribers, Finger Print Specialists, Forensic Odontologists, Dental Assistants, X-ray Technicians, Mental Health Specialists, Computer Professionals, Administrative support staff, and Security and Investigative personnel.

DMORTs provide:

- Temporary morgue facilities
- Victim identification
- Forensic dental pathology
- Forensic anthropology methods
- Processing, reparation, disposition of remains

The role of the **National Pharmaceutical Stockpile Program** is to maintain a national repository of lifesaving pharmaceuticals and medical material that will be delivered to the site of a bioterrorism event in order to reduce morbidity and mortality in civilian populations. Key aspects of the stockpile are:

- It is available now
- Consists of four “push-packages” that are ready to ship and can be on-site in 12 hours.
- Packages contain not only drugs but medical supplies and devices such as syringes and intravenous fluids
- It is deployed to the state at the request of the Governor

and authorized by the CDC Director

- A larger supply from the manufacturer arrives in 24 to 36 hours
- States must coordinate all logistics including ground transportation once planes arrive at a safe airport
- One push pack contains 109 pallets and fills three 48' tractor-trailers
- CDC technical advisers arrive on scene ahead of the package to assist with operations
- The Governor must identify a state contact to assist with program and receive the “handoff” at airport

